

# 18/ Ext. of time ①  
Hawkins  
PATENT 1-29-03  
GECAN 3194

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: W. R. Hugh Fife :  
Serial No.: 09/602,525 : Art Unit: 2834  
Filed: June 13, 2000 : Examiner: Gonzalez, Julio C.  
For: BRACKET ASSEMBLY FOR A :  
DYNAMOELECTRIC :  
MACHINE :

Commissioner for Patents  
Washington, D.C. 20231

TRANSMITTAL

1. Transmitted herewith is:

**Amendment in response to Office Action dated September 6, 2002 (14 pgs.);  
Submission of Marked Up Claims (2 pg.); Request for Approval of Drawing  
Changes (1 pg. plus 2 sheets of drawings); Certificate of Express Mail (1 pg.) ;  
Return Post Card**

STATUS

2. Applicant  
☒ Claims small entity status.  
☒ is other than a small entity.

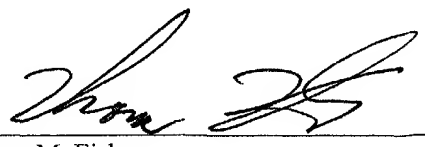
CERTIFICATE OF MAILING/TRANSMISSION

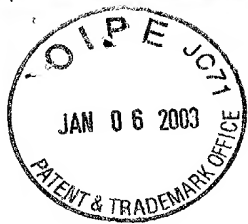
I hereby certify that this correspondence is, on the date shown below, being:

MAILING  
☒ deposited with the United States Postal Service with  
sufficient postage as "Express Mail Post Office to  
Addressee" in an envelope addressed to:  
Commissioner for Patents, Washington, D.C.  
20231, Express Mail No. EV 263878912 US.

FACSIMILE  
Transmitted by facsimile to the Patent and Trademark  
Office

Date: January 6, 2003

  
Thomas M. Fisher  
Reg. No. 47,564



## EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

| Extension for response within:                  | Other than small entity Fee | Small entity Fee (if applicable) |
|---|-----------------------------|----------------------------------|
| <input checked="" type="checkbox"/> First month | \$ 110.00                   | \$ 55.00                         |
| <input type="checkbox"/> Second month           | \$ 410.00                   | \$ 205.00                        |
| <input type="checkbox"/> Third month            | \$ 930.00                   | \$ 465.00                        |
| <input type="checkbox"/> Fourth month           | \$1,450.00                  | \$ 725.00                        |
| <input type="checkbox"/> Fifth month            | \$1,970.00                  | \$ 985.00                        |

Fee: \$ 110.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

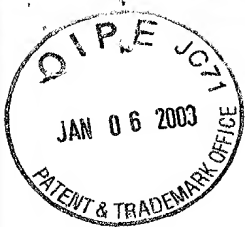
— An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

OR

- (b) — Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

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### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

|   | (Col. 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | (Col. 2)<br>HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA | SMALL ENTITY<br>ADDITIONAL<br>RATE FEE | OR | OTHER THAN<br>SMALL ENTITY<br>ADDITIONAL<br>RATE FEE |
|---|---|-------|---|------------------------------|--|----|--|
| TOTAL                                     |   | MINUS |   | =                            | x \$9 = \$                             |    | x \$18 = \$  |
| INDEP.                                    |   | MINUS |   | =                            | x \$42 = \$                            |    | x \$84 = \$  |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |       |   |                              | + \$140 = \$                           |    | + \$280 = \$   |
|   |   |       |   |                              | TOTAL ADDITIONAL<br>FEE \$             | OR | TOTAL ADDITIONAL<br>FEE \$                           |

- (a) ☒ No additional fee for claims is required.

OR

- (b) \_\_\_\_\_ Total additional fee for claims required \$

### FEE PAYMENT


5. \_\_\_\_\_ Attached is a check in the sum of \$ \_\_\_\_\_  
☒ Charge Deposit Account No. 01-2384 the sum of \$ 110.00  
A duplicate of this transmittal is attached.

### FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.  
7. \_\_\_\_\_ Other:

  
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